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Dr Elizabeth Rayment
Newport Medical Centre
5/1 Kalinya Street
Newport Beach NSW 2106

Dear Dr Rayment,

Re: Lauren Scott - DOB: 09/05/94
10/91 Foamcrest Avenue, Newport NSW 2106

Background:

1. Pericarditis
2. Right ovarian cyst rupture

Medications:

- Anakinra 100 mg subcutaneously daily
- Ibuprofen 400 mg tds
- Pantoprazole 40 mg daily
- Agomelatine 25 mg nocte
- Quetiapine 12.5 mg nocte

Today it was a pleasure to catch up with Lauren, who has thankfully made some progress since previous review. Lauren describes that sharp, very limiting chest pressure as having settled with treatment, after an initial flare. Lauren has started to be able to sleep off her wedge as the sharp pain is now a lot more manageable, although she still has a little bit of chest pressure and occasionally has to pull the wedge back. Lauren has been able to go to the beach a few times, which is only 5 minutes walking, but certainly has not had the big jumps in heart rate and has been able to engage a little bit more with her normal life. There have been occasional episodes where Lauren has felt very exhausted and I've told her that there will likely be a period of deconditioning in the context of such a significant and protracted illness. Lauren denies any symptoms of cardiac failure. She does get the occasional fluttering sensation in the chest, with a heart rate immediately jumping to 135 bpm and settling down to 60 again, and settling with cough. I think she probably has SVT and I have given her some Valsalva manoeuvre strategies to try to improve this.

On examination today, Lauren's cardiovascular examination was normal. Her ECG demonstrated normal sinus rhythm with normal axis and cardiac indices. There were no signs of pericarditis.

I am really pleased that Lauren is starting to make some steps in the right direction and is starting to be able to exert herself without that really severe, limiting pain. She does still get some chest heaviness and hopefully that will abate with treatment. I have suggested she re-engage with Cardiac Rehab at Delmar, as she started the process previously but didn't feel up to it. We have also talked about her work with The Iconic and I've suggested that computer work would be reasonable but that she should trial sitting upright, as that previously has been a trigger for her when she sat up for long periods. I think when she starts to be able to sit comfortably for long stretches then she should re-engage with her work. The Cardiac Rehab, I'm sure, will help build her confidence back up. I will see Lauren again for a review and echocardiogram in a couple of months' time but I would be happy to be contacted if there are any concerns in the interim.